FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 24 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00062004 1 NAME TITLE; FIRST; MI **OFFICE USE ONLY** The Honorable Craig **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 04/30/2019 Goldman 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # Post Office Box 100039 HD / PM Amount Fort Worth, TX 76185 Date Processed X (CHECK IF FILER'S HOME ADDRESS) AREA CODE PHONE NUMBER; EXTENSION **TELEPHONE** Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE _____ (INDICATE OFFICE) ELECTED OFFICER __State Representative District 97 (INDICATE OFFICE) APPOINTED OFFICER ______ (INDICATE AGENCY) EXECUTIVE HEAD _____ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR ______ (INDICATE PARTY) OTHER _____ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). Mrs. Auryn Goldman SPOUSE **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD ___ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER SELF** ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 **POSITION HELD** NATURE OF OCCUPATION X SELF-EMPLOYED Real Estate Investments INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** The State of Texas ADDRESS / PO BOX; ZIP CODE APT / SUITE #; CITY; STATE; 105 West 15th Street Austin, TX 78701 POSITION HELD State Representative NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD __ **EMPLOYMENT** NAME AND ADDRESS OF EMPLOYER / POSITION HELD EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER SELF** ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; Post Office Box 101867 Fort Worth, TX 76185 POSITION HELD

X SELF-EMPLOYED

Real Estate Investments

NATURE OF OCCUPATION

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1 FEE RECEIVED FROM	NAME AND ADDRESS
	CAGoldman Enterprises LLC
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	Post Office Box 101867
	Fort Worth, TX 76185
2 FEE RECEIVED BY	NAME OF BUSINESS
	X FILER
	OR FILER'S BUSINESS
	SPOUSE
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
3 FEE AMOUNT	
	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000 - OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED FROM	NAME AND ADDRESS CA Goldman Enterprises LLC
FEE RECEIVED FROM	
FEE RECEIVED FROM	CA Goldman Enterprises LLC
FEE RECEIVED FROM	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West
FEE RECEIVED FROM	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
FEE RECEIVED FROM	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS
FEE RECEIVED BY	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD
	CA Goldman Enterprises LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2300 Winton Terrace West Fort Worth, TX 76109 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD

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1 FEE RECEIVED FROM	NAME AND ADDRESS
	The Buchman Group
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	ADDRESS/PO BOX, APT/SOITE#, CITT, STATE, ZIP CODE
2 FEE RECEIVED BY	NAME OF BUSINESS
	☐ FILER
	OR FILER'S BUSINESS
	X SPOUSE
	OR SPOUSE'S BUSINESS
	OK 31 0032 3 B03111203
	_
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
3 FEE AMOUNT	
	LESS THAN \$5,000 X \$5,000 - \$9,999 S25,000 - OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED FROM	NAME AND ADDRESS Buchman Realty LLC
FEE RECEIVED FROM	Buchman Realty LLC
FEE RECEIVED FROM	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
FEE RECEIVED FROM	Buchman Realty LLC
FEE RECEIVED FROM	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
FEE RECEIVED FROM	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
FEE RECEIVED FROM	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185
FEE RECEIVED BY	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS TILER OR FILER'S BUSINESS X SPOUSE
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS TILER OR FILER'S BUSINESS SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS TILER OR FILER'S BUSINESS SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD
FEE RECEIVED BY	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS OR FILER'S BUSINESS OR SPOUSE'S BUSINESS DEPENDENT CHILD OR CHILD'S BUSINESS
	Buchman Realty LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 100224 Fort Worth, TX 76185 NAME OF BUSINESS TILER OR FILER'S BUSINESS SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD

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1 FEE RECEIVED FROM	NAME AND ADDRESS
	AGSB Holdings LLC
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	Post Office Box 100224
	1 03t Office Box 100224
	5 d. 5v.70405
	Fort Worth , TX 76185
2 FEE RECEIVED BY	NAME OF BUSINESS
	∐ FILER
	OR FILER'S BUSINESS
	X SPOUSE
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
3 FEE AMOUNT	
FEE AMOUNT	X LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000 - OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
	Diamond Villa Apartments LLC
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	Post Office Box 100224
	Fort Worth, TX 76185
FEE RECEIVED BY	NAME OF BUSINESS
	FILER
	OR FILER'S BUSINESS
	X SPOUSE
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
FEE AMOUNT	
	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000 - OR MORE
EEE AMOUNT	OK CITIES S BOSINESS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

This section concerns fees received as a retainer by you, your spouse, or a dependent child (or by a business in which you, your spouse, or a dependent child have a "substantial interest") for a claim on future services in case of need, rather than for services on a matter specified at the time of contracting for or receiving the fee. Report information here only if the value of the work actually performed during the calendar year did not equal or exceed the value of the retainer. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 FEE RECEIVED FROM	NAME AND ADDRESS
	SC Apartments LLC
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	Post Office Box 100224
	Fort Worth, TX 76185
2 FEE RECEIVED BY	NAME OF BUSINESS
	FILER
	OR FILER'S BUSINESS
	X SPOUSE
	OR SPOUSE'S BUSINESS
	DEPENDENT CHILD
	OR CHILD'S BUSINESS
3 FEE AMOUNT	
J LE AWOONT	LESS THAN \$5,000 S5,000 - \$9,999 S10,000 - \$24,999 X \$25,000 - OR MORE
FEE RECEIVED FROM	NAME AND ADDRESS
FEE RECEIVED FROM	NAME AND ADDRESS Martha's Villa LLC
FEE RECEIVED FROM	
FEE RECEIVED FROM	Martha's Villa LLC
FEE RECEIVED FROM	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867
FEE RECEIVED FROM	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185
FEE RECEIVED FROM FEE RECEIVED BY	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS OR FILER OR FILER'S BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD
	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS TILER OR FILER'S BUSINESS OR SPOUSE'S BUSINESS DEPENDENT CHILD OR CHILD'S BUSINESS
FEE RECEIVED BY	Martha's Villa LLC ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE Post Office Box 101867 Fort Worth, TX 76185 NAME OF BUSINESS FILER OR FILER'S BUSINESS X SPOUSE OR SPOUSE'S BUSINESS DEPENDENT CHILD DEPENDENT CHILD

STOCK PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 BUSINESS ENTITY	Cullen Frost Bankers		NAME	
2 STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
3 NUMBER OF SHARES	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
	X LESS THAN 10K	10,000 OR MORE		
4 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY	Exxon Mobil Corp		NAME	
STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
NUMBER OF SHARES	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
	X LESS THAN 10K	10,000 OR MORE		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
BUSINESS ENTITY			NAME	
BUSINESS ENTITY	Radio Shack		NAME	
BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	Radio Shack X FILER	SPOUSE	NAME DEPENDENT CHILD)
STOCK HELD OR				1,000 TO 4,999
STOCK HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	_
STOCK HELD OR ACQUIRED BY	X FILER X LESS THAN 100	SPOUSE 100 TO 499	DEPENDENT CHILD	_
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN	X FILER X LESS THAN 100 LESS THAN 10K	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD	1,000 TO 4,999
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Samson Lonestar	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Samson Lonestar X FILER	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE
STOCK HELD OR ACQUIRED BY NUMBER OF SHARES IF SOLD NET GAIN NET LOSS BUSINESS ENTITY STOCK HELD OR ACQUIRED BY	X FILER X LESS THAN 100 LESS THAN 10K LESS THAN \$5,000 Samson Lonestar X FILER X LESS THAN 100	SPOUSE 100 TO 499 10,000 OR MORE \$5,000 - \$9,999 SPOUSE 100 TO 499	DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999 NAME DEPENDENT CHILD	1,000 TO 4,999 \$25,000OR MORE

BONDS, NOTES & OTHER COMMERCIAL PAPER PART 3 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **DESCRIPTION OF** United States Savings Bonds **INSTRUMENT** HELD OR X FILER **ACQUIRED BY** SPOUSE DEPENDENT CHILD IF SOLD ☐ NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

Which the child is listed on the Co				
1 SOURCE OF INCOME		NAME A	ND ADDRESS	
Publicly held corporation	Cullen Frost Bankers ADDRESS / F 100 W. Houston	PO BOX; APT / SUITE #	t; CITY; STA	ATE; ZIP CODE
	San Antonio , TX 7820)5		
2 RECEIVED BY	X FILER	SPOUSE	DEPENDENT C	HILD
3 AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,99	99
SOURCE OF INCOME		NAME A	ND ADDRESS	
Publicly held corporation	Exxon Mobil Corporati ADDRESS / F 5959 Las Colinas Blvd	PO BOX; APT / SUITE #	ŧ; CITY; STA	ATE; ZIP CODE
	Irving , TX 75039			
RECEIVED BY	X FILER	SPOUSE	DEPENDENT C	HILD
AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	X \$10,000 - \$24,99	99
SOURCE OF INCOME		NAME AI	ND ADDRESS	
SOURCE OF INCOME Publicly held corporation	1880 Hulen Street	PO BOX; APT / SUITE #		ATE; ZIP CODE
_	ADDRESS / F 1880 Hulen Street Fort Worth, TX 76107	PO BOX; APT / SUITE #	ŧ; CITY; STA	
Publicly held corporation	ADDRESS / F 1880 Hulen Street	PO BOX; APT / SUITE #	ŧ; CITY; STA	ATE; ZIP CODE
Publicly held corporation	ADDRESS / F 1880 Hulen Street Fort Worth, TX 76107	PO BOX; APT / SUITE #	ŧ; CITY; STA	HILD

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD)
2	STREET ADDRESS	ST 2701 South Hulen Str		DING CITY, COUNTY, AND	STATE
	NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	Fort Worth, TX 76109			
3	DESCRIPTION	NUMBER	OF LOTS OR ACRES AN	D NAME OF COUNTY WHE	ERE LOCATED
	X LOTS	1.00000 lots			
	ACRES	Tarrant			
4	NAMES OF PERSONS RETAINING AN INTEREST	Michaels, Lorin (Mrs.)			
	NOT APPLICABLE (SEVERED MINERAL	Goldman, Adam (Mr.)			
	INTEREST)	Goldman, Marc (Mr.)			
		Liberty Bank			
5	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD)
	HELD OR ACQUIRED BY STREET ADDRESS	ST		DEPENDENT CHILD	
	STREET ADDRESS	ST			
	STREET ADDRESS	ST (see previous)	TREET ADDRESS, INCLUI		STATE
	STREET ADDRESS NOT AVAILABLE	ST (see previous)	TREET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE DESCRIPTION LOTS	ST (see previous)	TREET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE DESCRIPTION LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	ST (see previous) NUMBER	TREET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE DESCRIPTION LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE	(see previous) NUMBER Liberty Bank	REET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE DESCRIPTION LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	ST (see previous) NUMBER Liberty Bank Goldman, Marc (Mr.)	REET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE
	STREET ADDRESS NOT AVAILABLE DESCRIPTION LOTS ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	ST (see previous) NUMBER Liberty Bank Goldman, Marc (Mr.) Goldman, Adam (Mr.)	REET ADDRESS, INCLUI	DING CITY, COUNTY, AND	STATE

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

	over Street.
1 HELD OR ACQUIRED BY	FILER SPOUSE DEPENDENT CHILD
2 STREET ADDRESS NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE (see previous)
3 DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	Liberty Bank Michaels, Lorin (Mrs.)
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	X FILER X SPOUSE DEPENDENT CHILD
HELD OR ACQUIRED BY STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	X FILER X SPOUSE DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	408 North Fielder F	Road	LUDING CITY, COUNTY, AND	STATE
3 DESCRIPTION LOTS X ACRES	NUMB 13.00000 acres Tarrant	ER OF LOTS OR ACRES	AND NAME OF COUNTY WHE	RE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	Frost Bank			
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,0	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	r
HELD OR ACQUIRED BY STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	FILER 513 West Dickey F Grand Prairie, TX	STREET ADDRESS, INCI	DEPENDENT CHILD	
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	513 West Dickey F	STREET ADDRESS, INCI Road 75051		STATE
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS	513 West Dickey F Grand Prairie, TX T NUMB 9.00000 acres	STREET ADDRESS, INCI Road 75051 ER OF LOTS OR ACRES	LUDING CITY, COUNTY, AND	STATE
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS X ACRES NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	513 West Dickey F Grand Prairie, TX 7 NUMB 9.00000 acres Dallas	STREET ADDRESS, INCIROAD 75051 ER OF LOTS OR ACRES	LUDING CITY, COUNTY, AND	STATE

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	FILER X SPOUSE DEPENDENT CHILD
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 5900 South Calloway Fort Worth, TX 76114
3 DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 7.00000 acres Tarrant
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)	
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
HELD OR ACQUIRED BY	FILER X SPOUSE DEPENDENT CHILD
HELD OR ACQUIRED BY STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	FILER X SPOUSE DEPENDENT CHILD STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 3102 Oradell Lane Dallas, TX 75220
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 3102 Oradell Lane
STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS DESCRIPTION LOTS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 3102 Oradell Lane Dallas, TX 75220 NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 7.00000 acres

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about which the child is listed on the Co	t a dependent child's activity, over Sheet.	, indicate the child about w	hom you are reporting by pr	oviding the number under
1 HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
2 STREET ADDRESS NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	ST 2900 South Freeway Fort Worth, TX 76104		DING CITY, COUNTY, AND	STATE
3 DESCRIPTION ☐ LOTS ☒ ACRES	NUMBER 4.00000 acres Tarrant	OF LOTS OR ACRES AN	ID NAME OF COUNTY WHE	ERE LOCATED
4 NAMES OF PERSONS RETAINING AN INTEREST X NOT APPLICABLE (SEVERED MINERAL INTEREST)				
5 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

ı		over Sheet.			
1	HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	
2	DESCRIPTION		_	ND ADDRESS	
		LCAM Limited Compar		Filer's Home Address)	
		1880 Hulen Street	·y		
L		Fort Worth, TX 76107			
3	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	·
H	DESCRIPTION		NAME A	ND ADDRESS	
				Filer's Home Address)	
		CA Goldman Enterpris	es LLC ■		
	IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	☐ NET LOSS				
	HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
	HELD OR ACQUIRED BY DESCRIPTION	FILER	NAME AI	ND ADDRESS	'
		FILER Buchman Realty	NAME AI		·
			NAME AI	ND ADDRESS	
		Buchman Realty Post Office Box 10022	NAME AI	ND ADDRESS	·
	DESCRIPTION	Buchman Realty	NAME AI	ND ADDRESS	` <u></u>
		Buchman Realty Post Office Box 10022	NAME AI	ND ADDRESS	\$25,000OR MORE
	DESCRIPTION IF SOLD NET GAIN NET LOSS	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185	NAME AI (Check if F	ND ADDRESS Filer's Home Address)	
	DESCRIPTION IF SOLD NET GAIN	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185	NAME AI (Check if F	ND ADDRESS Filer's Home Address)	\$25,000OR MORE
	DESCRIPTION IF SOLD NET GAIN NET LOSS	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000	NAME AI (Check if F 4	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999	\$25,000OR MORE
_	DESCRIPTION IF SOLD NET GAIN NET LOSS HELD OR ACQUIRED BY	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000	NAME AI (Check if F 4 \$5,000 - \$9,999 X SPOUSE NAME AI	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999 DEPENDENT CHILD	\$25,000OR MORE
	DESCRIPTION IF SOLD NET GAIN NET LOSS HELD OR ACQUIRED BY	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000 FILER AGSB Holdings LLC	NAME AI (Check if F 4 \$5,000 - \$9,999 X SPOUSE NAME AI (Check if F	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999 DEPENDENT CHILD ND ADDRESS	\$25,000OR MORE
=	DESCRIPTION IF SOLD NET GAIN NET LOSS HELD OR ACQUIRED BY	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000	NAME AI (Check if F 4 \$5,000 - \$9,999 X SPOUSE NAME AI (Check if F	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999 DEPENDENT CHILD ND ADDRESS	\$25,000OR MORE
	DESCRIPTION IF SOLD NET GAIN NET LOSS HELD OR ACQUIRED BY	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000 FILER AGSB Holdings LLC	NAME AI (Check if F 4 \$5,000 - \$9,999 X SPOUSE NAME AI (Check if F	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999 DEPENDENT CHILD ND ADDRESS	\$25,000OR MORE
	DESCRIPTION IF SOLD NET GAIN NET LOSS HELD OR ACQUIRED BY	Buchman Realty Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000 FILER AGSB Holdings LLC Post Office Box 10022	NAME AI (Check if F 4 \$5,000 - \$9,999 X SPOUSE NAME AI (Check if F	ND ADDRESS Filer's Home Address) \$10,000 - \$24,999 DEPENDENT CHILD ND ADDRESS	\$25,000OR MORE

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

which the child is listed on the Co				
1 HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
2 DESCRIPTION	The Buchman Group I	X (Check if	AND ADDRESS Filer's Home Address)	
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
DESCRIPTION	Diamond Villa Apartmo	(Check if	AND ADDRESS Filer's Home Address)	
	Fort Worth, TX 76185	-		
IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD)
HELD OR ACQUIRED BY DESCRIPTION	Prairie Villa Apartment Post Office Box 10022	NAME A (Check if	DEPENDENT CHILD AND ADDRESS Filer's Home Address))
	Prairie Villa Apartment Post Office Box 10022 Fort Worth, TX 76185	NAME A (Check if	AND ADDRESS	\$25,000OR MORE
DESCRIPTION IF SOLD NET GAIN	Prairie Villa Apartment Post Office Box 10022 Fort Worth, TX 76185	NAME A (Check if ts LLC	AND ADDRESS Filer's Home Address)	\$25,000OR MORE
DESCRIPTION IF SOLD NET GAIN NET LOSS	Prairie Villa Apartment Post Office Box 10022 Fort Worth, TX 76185 LESS THAN \$5,000	NAME A (Check if ts LLC 24 \$5,000 - \$9,999 X SPOUSE NAME A	AND ADDRESS Filer's Home Address) \$10,000 - \$24,999	\$25,000OR MORE

INTEREST IN BUSINESS ENTITIES

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

	When reputing information about				
	When reporting information about which the child is listed on the Co	over Sheet.	, indicate the child about v	whom you are reporting by pro-	viding the number under
1	HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
2	DESCRIPTION	Arlington Village Apar Post Office Box 10022	(Check if tments LLC	AND ADDRESS Filer's Home Address)	
3	IF SOLD NET GAIN NET LOSS	Fort Worth, TX 76185	_	\$10,000 - \$24,999	\$25,000OR MORE
	HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	
	DESCRIPTION	Martha's Villa LLC Post Office Box 10186 Fort Worth, TX 76185	(Check if	AND ADDRESS Filer's Home Address)	
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE

TRUST INCOME PART 9 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Identify each source of income received by you, your spouse, or a dependent child as beneficiary of a trust and indicate the category of the amount of income received. Also identify each asset of the trust from which the beneficiary received more than \$500 in income, if the identity of the asset is known. For more information, see FORM PFS--INSTRUCTION GUIDE When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. SOURCE NAME OF TRUST Craig Alan Goldman Nonexempt Trust 2 BENEFICIARY X FILER SPOUSE DEPENDENT CHILD __ 3 INCOME LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 X \$25,000--OR MORE ASSETS FROM WHICH common stock dividends from Cullen Frost Bankers and ExxonMobil **OVER \$500 WAS RECEIVED** UNKNOWN

OWNERSHIP OF BUSINESS ASSOCIATIONS

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about the child is listed on the Cover	out a dependent child's activity, indicate the child about whom you are reporting by providing the number under which Sheet.
1 BUSINESS ASSOCIATION	NAME AND ADDRESS (Check If Filer's Home Address) CAGoldman Enterprises, LLC Post Office Box 101867 Fort Worth, TX 76185
2 DESCRIPTION	
3 BUSINESS TYPE	Corporation Limited Partnership Profesional Association Firm X Limited Liability Partnership Joint Venture Partnership Professional Corporation Other
4 HELD, ACQUIRED, OR SOLD BY	X FILER X SPOUSE DEPENDENT CHILD

ASSETS OF BUSINESS ASSOCIATIONS

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

l	the child is listed on the Cover S	Sheet.			
1	BUSINESS	NAME AND ADDRESS			
l	ASSOCIATION	(Check If Filer's Home Address)			
		CAGoldman Enterprises	, LLC		
		Post Office Box 101867			
		Fort Worth, TX 76185			
⊢					
2	BUSINESS TYPE	Limited Liability Partners	hip		
~	HELD, ACQUIRED,				
ľ	OR SOLD BY	X FILER	X SPOUSE	DEPENDENT CHILD _	
┝	ASSETS	DESCI	RIPTION	I CATE	EGORY
	ASSETS	Real Estate	AF HON	i	
		i i cai Estate		LESS THAN \$5,000	\$5,000 - \$9,999
				\$10,000 - \$24,999	X \$25,000 OR MORE
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BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	ORGANIZATION	LCAM Limited Company		
2	POSITION HELD	Limited Member		
3	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	CAGoldman Enterprises	LLC	
	POSITION HELD	Limited Member		
	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	CAGoldman Enterprises		
	POSITION HELD	Limited Member		
	POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ı				

INTEREST IN BUSINESS IN COMMON WITH LOBBYIST **PART 14** If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Identify each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association, other than a publicly-held corporation, in which you, your spouse, or a dependent child, and a person registered as a lobbyist under chapter 305 of the Government Code that both have an interest. For more information, see FORM PFS--INSTRUCTION GUIDE. NAME AND ADDRESS 1 BUSINESS ENTITY LCAM Limited Company 1880 Hulen Street Fort Worth, TX 76107 2 INTEREST HELD BY X FILER SPOUSE DEPENDENT CHILD

PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	TS NOT APPLICABLE TO FILER
		N/A Part 1A - Sources of Occupational Income
		N/A Part 1B - Retainers
		N/A Part 2 - Stock
		N/A Part 3 - Bonds, Notes & Other Commercial Paper
	Χ	N/A Part 4 - Mutual Funds
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
	Х	N/A Part 6 - Personal Notes and Lease Agreements
		N/A Part 7A - Interests in Real Property
		N/A Part 7B - Interests in Business Entities
	Χ	N/A Part 8 - Gifts
		N/A Part 9 - Trust Income
	Х	N/A Part 10A - Blind Trusts
	Χ	N/A Part 10B - Trustee Statement
		N/A Part 11A - Business Associations
		N/A Part 11B - Assets of Business Associations
	Χ	N/A Part 11C - Liabilities of Business Associations
		N/A Part 12 - Boards and Executive Positions
	Χ	N/A Part 13 - Expenses Accepted Under Honorarium Exception
		N/A Part 14 - Interest in Business in Common with Lobbyist
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Χ	N/A Part 16 - Representation by Legislator Before State Agency
	Х	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
	Χ	N/A Part 18 - Legislative Continuances
	Χ	N/A Part 19 - Contracts with Governmental Entity
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator

a low requires the personal financial statement to 1.	and Mithout proper verification the eleterment is not according to
	ied. Without proper verification, the statement is not considered filed.
e verification page on a personal statement filed electronic ividual required to file the personal financial statement.	cally with the Texas Ethics Commission must have the electronic signature of th
e verification page on a personal financial statement filed whe individual required to file the personal financial statement son authorized by law to administer oaths and affirmation	with an authority other than the Texas Ethics Commission must have the signa ent as wells as the signature and stamp or seal of office of a notary public or ot s.
	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct
	and includes all information required to be reported by me under chapter 572 of the Government Code.
	The Honorable Craig Goldman
	Signature of Filer
FFIX NOTARY STAMP / SEAL ABOVE	
worn to and subscribed before me, by the said	, this the day
, 20, to certify which, wi	itness my hand and seal of office.
Signature of officer administering oath Printed	name of officer administering oath Title of officer administering oat